

718000011182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

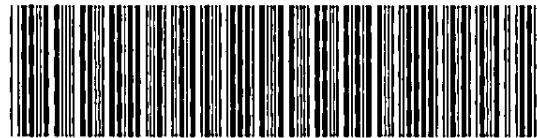
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## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: THE FRANCIS FOUNDATION INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: TOYA BARUSO  
Name (Printed or typed)

3424 MIDDLEBROOK PLACE  
Address

HARMONY, FL 34773  
City, State & Zip

407-994-8994  
Daytime Telephone number

toyabaruso@hotmail.com  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: THE FRANCIS FOUNDATION INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

3424 Middlebrook Place

HARMONY, FL 34773

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: A COMMUNITY OUTREACH  
SERVING PEOPLE IN NEED OF SUPPLIES AND RESOURCES  
TO BECOME MORE PRODUCTIVE IN SOCIETY. TO  
BRING HOPE BY PROVIDING BASIC NEEDS TO  
THOSE WHO DONT HAVE MANY OPTIONS.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: \_\_\_\_\_

shared vision to help our community

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>TOYA BARUSO</u>	Name and Title:	<u>DIANA RODRIGUEZ</u>
	<u>DIRECTOR</u>		<u>OFFICER</u>
Address:	<u>3424 Middlebrook Pl</u>	Address:	<u>250 ORANGE AVENUE</u>
	<u>HARMONY, FL 34773</u>		<u>Clt. Cloud, FL 34769</u>

Name and Title:	<u>Nicole Mehit</u>	Name and Title:	_____
	<u>OFFICER</u>		_____
Address:	<u>1577 Softshell Street</u>	Address:	_____
	<u>Clt. Cloud, FL 34771</u>		_____

Name and Title:	_____	Name and Title:	_____
	_____		_____
Address:	_____	Address:	_____
	_____		_____

FILED  
JAN 13 2019  
CLT. CLOUD, FL

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: TONYA BARUSO

Address: 3424 Middlebrook Place  
HARMONY, FL 34773

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: TONYA BARUSO

Address: 3424 Middlebrook Place  
HARMONY, FL 34773

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

\_\_\_\_\_  
Required Signature of Registered Agent

11/12/2018  
Date

*submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

\_\_\_\_\_  
Required Signature of Incorporator

11/12/2018  
Date